POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.B	⟨illegible⟩	9-11-⟨⟩
O.I.P.E. CLASSIFIER		48	9/15/00
FORMALITY REVIEW	JK	835	10/18/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim Final	Original	Date 09/11										
	①1	✓										
	2	✓										
	3	✓										
	4	✓										
	5	✓										
	6	✓										
	7	✓										
	8	✓										
	9	✓										
	10	✓										
	11	✓										
	12	✓										
	13	✓										
	14	✓										
	15	✓										
	16	✓										
	17	✓										
	18	✓										
	19	✓										
	20	✓										
	21	✓										
	22	✓										
	23	✓										
	24	✓										
	㉕25	✓										
	26	✓										
	27	✓										
	28	✓										
	29	✓										
	30	✓										
	31	✓										
	32	✓										
	33	✓										
	34	✓										
	35	✓										
	36	✓										
	�37	✓										
	38	✓										
	39	✓										
	40	✓										
	41	✓										
	42	✓										
	43	✓										
	44	✓										
	㊺45	✓										
	46	✓										
	47	✓										
	48	✓										
	49	✓										
	50	✓										

Claim Final	Original	Date 09/11										
	51	✓										
	52	✓										
	53	✓										
	㊴54	✓										
	55	✓										
	56	✓										
	57	✓										
	58	✓										
	59	✓										
	60	✓										
	�61	✓										
	62	✓										
	63	✓										
	64	✓										
	65	✓										
	66	✓										
	67	✓										
	68												
	69												
	70												
	71												
	72												
	73												
	74												
	75												
	76												
	77												
	78												
	79												
	80												
	81												
	82												
	83												
	84												
	85												
	86												
	87												
	88												
	89												
	90												
	91												
	92												
	93												
	94												
	95												
	96												
	97												
	98												
	99												
	100												

Claim Final	Original	Date										
	101												
	102												
	103												
	104												
	105												
	106												
	107												
	108												
	109												
	110												
	111												
	112												
	113												
	114												
	115												
	116												
	117												
	118												
	119												
	120												
	121												
	122												
	123												
	124												
	125												
	126												
	127												
	128												
	129												
	130												
	131												
	132												
	133												
	134												
	135												
	136												
	137												
	138												
	139												
	140												
	141												
	142												
	143												
	144												
	145												
	146												
	147												
	148												
	149												
	150												

If more than 150 claims or 10 actions
staple additional sheet here